

O I P E  
Serial No. 09/898877  
APR 01 2003  
Applicant: BISKEBORN, R.

PATENT

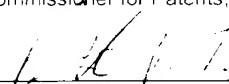
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: BISKEBORN, R. Examiner: Unknown  
Serial No.: 09/898877 Group Art Unit: 1765  
Filed: July 3, 2001 Docket No.: SJO920000084US1  
501.347-US-01

Title: METHOD AND APPARATUS FOR THE MANUFACTURE OF THIN FILM  
MAGNETIC TRANSDUCERS USING A COMPLIANT, SOFT LAPPING  
PROCESS

CERTIFICATE UNDER 37 C.F.R. 1.8: The undersigned hereby certifies that this Transmittal Letter and the paper, as described herein, are being deposited in the United States Postal Service, as first class mail, with sufficient postage, in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on APR 01 2003.

David W. Lynch  
Name

  
Signature

RESPONSE TO RESTRICTION REQUIREMENT

J RECEIVED

Assistant Commissioner for Patents  
Washington, D.C. 20231

APR 03 2003

GROUP 1700

Dear Sir:

In response to the restriction requirement dated February 25, 2003, Applicants  
hereby elect Group II, (claims 10-20) with traverse.

Any questions regarding this communication should be directed to the  
undersigned attorney at (952) 253-4104.

Respectfully submitted,

Altera Law Group, LLC



Date: APR 01 2003

By: 

David W. Lynch  
Reg. No. 36,204  
DWL/tmj

APR 01 2003

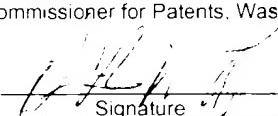
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David W. Lynch  
 Name

  
 Signature

Assistant Commissioner for Patents  
 Washington, D.C. 20231

**RECEIVED**

APR 03 2003

**GROUP 1700**

- Response To Restriction Requirement
- Transmittal Sheet
- Return postcard

| CLAIMS AS AMENDED         |                                  |                                 |                      |           |      |
|---------------------------|----------------------------------|---------------------------------|----------------------|-----------|------|
|                           | Claims Remaining After Amendment | Highest No. Previously Paid For | Extra Claims Present | Rate      | Fees |
| Total Claims              |                                  |                                 |                      | X \$18.00 | \$   |
| Indep. Claims             |                                  |                                 |                      | X \$84.00 | \$   |
| Multiply Dependent Claims |                                  |                                 |                      |           | \$   |
|                           |                                  |                                 | TOTAL FEES           |           | \$   |

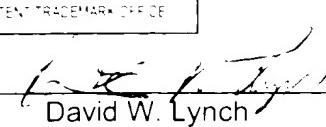
Authorization is hereby given to charge any additional fees or credit any overpayments that may be deemed necessary to Deposit Account Number 50-1038.

Respectfully submitted,

Altera Law Group, LLC



Date: 1/2/03 By:

  
 David W. Lynch  
 Reg. No. 36,204  
 DWL/tmj